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Tobacco Education and Prevention Program, ADHS



The public health price of tobacco use

- Thousands of teens start smoking everyday.
- Tobacco use costs the U.S. \$150 billion annually in medical expenses (CDC).
- Tobacco use causes 440,000 deaths each year in the U.S. (CDC).
- Secondhand smoke causes lung cancer and heart disease in nonsmokers.
- For every smoker who quits, nine will try and fail.
- Tobacco use is addicting.

ADHS Comprehensive Tobacco Control Network in Arizona

Funded by the tobacco tax through the ADHS Tobacco Education and Prevention Program

Community Projects

- 15 Community based tobacco control projects
- 11 Tribal Projects
- Four basic services: prevention, cessation, tobacco-free environments, administration

Statewide Projects

 Arizona Smokers' Helpline, Information Technology and Internet Services, HealthCare Partnership Continuing
 Education and Training Team, Worksite Outreach

Arizona Smokers' Helpline Services

Created in 1995

- Proactive telephone counseling
- Mailed self-help publications
- Information and referral to local services
- Reduced cost for NRT or Zyban
- Pre-recorded voicemail and FAX quit tips
- Cessation technical assistance
- www.ASHLine.org with interactive decisionmaking tools and E-mail

Who calls the Helpline?

	FY 98-99	FY 98-99	FY 99-00	FY 99-00	FY 00-01	FY 00-01	FY 01-02	FY 01-02	FY 02-03	FY 02-03
T (I N OII)	Quantity	Percent	Quantity	Percent	Quantity	Percent	Quantity	Percent	Quantity*	Percent
Total New Clients	6831	100.0%	6691	100.0%	5164	100.0%	3738	100.0%	2743	100.0%
Gender										
Male	3132	45.8%	3064	45.8%	2403	46.5%	1505	40.3%	907	38.0%
Female	3699	54.2%	3627	54.2%	2761	53.5%	2227	59.6%	1462	61.2%
Counseling Status					<u> </u>					
Information and Referral	5448	79.8%	5109	76.4%	2210	42.8%	1363	36.5%	865	31.5%
Counseling	1383	20.2%	1582	23.6%	2954	57.2%	2375	63.5%	1706	62.2%
Pregnancy Status										
Self-Identified Pregnant	215	3.1%	166	2.5%	108	2.1%	69	1.8%	43	1.8%
WIC Status										
WIC	242	3.5%	296	4.4%	231	4.5%	278	7.4%	149	6.2%
Health Insurance										
Yes, Insurance	4260	62.4%	3886	58.1%	2986	57.8%	2590	69.3%	1871	78.3%
No, Insurance	1658	24.3%	1839	27.5%	1634	31.6%	799	21.4%	412	17.2%
Refused, Missing	97	1.4%	73	1.1%	127	2.5%	321	8.6%	106	4.4%
Ethnicity										
African-American	240	3.5%	162	2.4%	97	1.9%	110	2.9%	86	3.6%
Asian-American	40	0.6%	38	0.6%	44	0.9%	20	0.5%	11	0.5%
White-Caucasian	5025	73.6%	4495	67.2%	3270	63.3%	2828	75.7%	1886	78.9%
All Hispanic	653	9.6%	1595	23.8%	1549	30.0%	550	14.7%	378	15.8%
Native American	65	1.0%	58	0.9%	43	0.8%	44	1.2%	20	0.8%
Mixed Race									25	1.0%
Other	159	2.3%	137	2.0%	50	1.0%	40	1.1%	219	9.2%
No Response	649	9.5%	206	3.1%	111	2.2%	146	3.9%	73	3.1%
Call Language										
English	6650	97.4%	5538	82.8%	3978	77.0%	3463	92.6%	2219	92.9%
Spanish	181	2.6%	1144	17.1%	1186	23.0%	275	7.4%	170	7.1%
Total Telephone Calls	11575		11622		10086		7781		7226	
Total Client E-mails	77		165		117		462		733	

Arizona Smokers' Helpline Recruitment

- 8,000-12,000 Arizonans call the Smokers' Helpline each year for information, counseling or referrals
- Approximately 65% of callers become Helpline clients
- Approximately 65% of clients choose long-term, proactive counseling
- Until FY 01-02, recruitment focus had been paid advertising, primarily TV

What motivates people to seek quittobacco services?

- Advertising (Paid) Interruption Marketing
 - Television
 - Radio
 - Newspaper
 - Billboards
 - Telephone book
- Referrals (Unpaid) Permission Marketing
 - Friends, family, former clients
 - Community-based tobacco projects, worksites
 - Healthcare providers
 - Community Events



Testing Recruitment Strategies with WIC Offices

- Began with free tobacco intervention training to Community Nutrition Workers (CNWs) at select WIC sites throughout the state (contractual relationship)
- WIC offered free give-aways to WIC clients who identified as tobacco-users willing to access services
- Provided referral data to WIC administrative office; WIC provided data on number of tobacco user's identified
- Hired former CNW as counselor at the Helpline

Pilot Testing Proactive Referrals in Arizona WIC Offices

- Proactive physician referral system successful in Oregon and Wisconsin
 - Faxed referrals accounted for 40-50% of Helpline calls in those states
- Tested Proactive Referral FAX System with Mohave County
 - Community project
 - Mohave WIC clinic



Using Permission Marketing to Increase Referrals

- People often are more responsive to and less skeptical of personal referrals than to traditional advertising
- Proactive Referral:
 - Referral agent conducts brief intervention and encourages client to quit
 - Gains client consent for Helpline call
 - Faxes referral to Helpline
 - Helpline calls and recruits client into services



FAX TO:

Arizona Smokers' Helpline

to the agency that sent you this fax:

2

Comments

ARIZONA SMOKERS' HELPLINE TOBACCO EDUCATION AND PREVENTION PROGRAM PROACTIVE REFERRAL FAX

FROM: (Stamp or write in your contact information here)

☐ I understand that the Arizona Smokers' Helpli referrals and/or counseling. My participation is vo confidential. I give the Helpline and the referring	oluntary. I understand that any	information I provide will be kept			
Client's Name (please print)	Client or Guardian's S	ignature			
□ Verbal consent received	Person obtaining verbal consent (sign and print)				
// Client Date of Birth	Best time to call client:				
Client's Address	□ 8am to 12pm	☐ 12pm to 5pm			
	☐ 5pm to 8:30pm	□ Specific:			
	□ Spanish Speaker	☐ English Speaker			
(□ Spanish Speaker	. English Speaker			

If your agency is receiving a proactive referral, please track the client contact information below, and fax this form back

(referring agency's fax number)

☐ Reached, accepted services ☐ Reached, declined services ☐ Not reached

□ Reached, accepted services □ Reached, declined services □ Not reached

□ Reached, accepted services □ Reached, declined services □ Not reached

WIC Effort Revised

- Focuses on one county's WIC offices;Mohave County
- Created Fax Referral for use in all three county WIC sites
- Referral directed clients to Mohave County Community-based quit tobacco program who offered referral to Helpline if not interest in classes



Results: Mohave Recruitment Increased Significantly

Community Project Referrals						
Region	FY 00-01	FY 01-02	Percent Change			
Arizona	316	632	100.0%			
Apache	12	17	41.7%			
Cochise	16	6	-62.5%			
Coconino	38	16	-57.9%			
Gila	0	1	-			
Graham	0	0	•			
Greenlee	1	0	-100.0%			
La Paz	11	30	172.7%			
Maricopa	30	52	73.3%			
Mohave	95	374	293.7%			
Navajo	13	11	-15.4%			
Pima	44	44	0.0%			
Pinal	8	7	-12.5%			
Santa Cruz	1	0	-100.0%			
Yavapai	36	51	41.7%			
Yuma	11	23	109.1%			

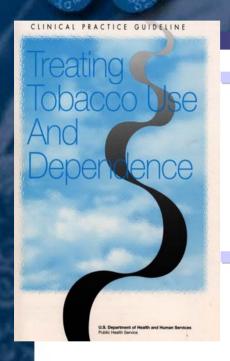
WIC Clinic Referrals						
Region	FY 00-01	FY 01-02	Percent Change			
Arizona	64	134	109.4%			
Apache	0	0	-			
Cochise	0	0	-			
Coconino	3	2	-33.3%			
Gila	0	0	-			
Graham	0	0	-			
Greenlee	0	0	-			
La Paz	0	0	-			
Maricopa	16	17	6.3%			
Mohave	29	99	241.4%			
Navajo	0	0	-			
Pima	0	1	-			
Pinal	7	3	-57.1%			
Santa Cruz	0	0	-			
Yavapai	9	12	33.3%			
Yuma	0	0	-			

Mohave Referrals = 59% of state total

Mohave WIC Referrals = 74% of state total



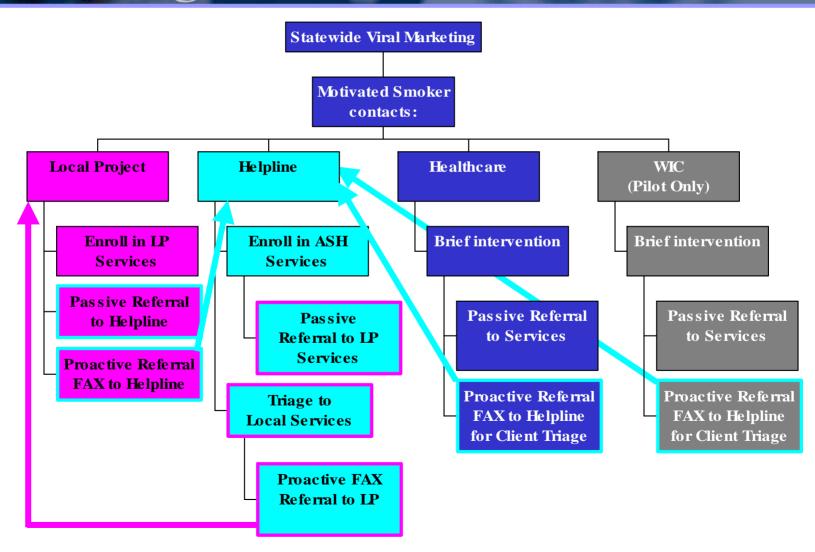
Background



- The PHS Guideline outlines strategies for healthcare providers to intervene with tobacco users (5As).
- Of the six system strategies for Healthcare Administrators, Insurers and Purchasers, strategy 2 is devoted to "providing education, resources and feedback to promote provider intervention".



Building a Referral Network



Proactive Referral System: Vision & Goals

Vision:

 To create a uniform manner in which to refer clients to free, research-based, quit-tobacco services.

Goals:

- Increase access to services statewide
- Increase cessation recruitment statewide
- Build relationships with healthcare practitioners (HCPs)
- Build relationships with Women, Infant, and Children clinics (WIC)

Proactive Referral System: Vision & Goals

Goals (continued):

- Increase awareness of tobacco tax-funded services
- Create system changes within healthcare
- Provide a mechanism for evaluation of productivity and cost effectiveness of training and referral system
- Decrease the prevalence of tobacco use



Healthcare Provider Recruitment

- Physicians, dentists, pharmacists call the Helpline
- Helpline clients name a healthcare provider as a referral source
- HCP Training Unit conducts Speakers' Bureau trainings
- National partners promote system within their memberships and provide training
- Community Projects promote system within their communities



Healthcare Provider Outreach

- Give healthcare providers the tools they need
 - Basic cessation intervention training (5As)
 - Collateral materials for waiting room
 - Strategies to change systems (chart stickers, FAX referral forms, NRT benefits, free cessation services, training, incentives)
 - Referral outcome data
- Distribute aggregate client data to MCOs
- Mail tailored packets MCO clients
- Mail thank-you letters, incentives



Speaker's Kit



SPEAKER'S KIT

The University of Arisma. • Arisma State University • Rentmen Arisma University.

- Speaker's Tools
- 18 PowerPoint Presentations on CD-ROM (>500 slides)
- Course Objectives
- Evaluation Forms
- Resource Materials:
 - Provider Resources
 - Patient Education
 - Proactive Referral Fax
- Continuing Education Information
- References



Presentations

Educational Objectives:

- Implement evidence-based strategies to perform brief tobacco cessation interventions;
- Identify the healthcare professional's role in tobacco prevention and cessation and how to incorporate a tobacco cessation program into the practice setting; and
- Describe community resources to reduce the health risks of tobacco





Continuing Education

Medical

- Physicians
- Physician's assistants
- Nurse practitioners
- Nurses
- Pharmacists
- Registered dieticians
- Dietetic technicians
- Respiratory therapists
- Physical therapists
- Chiropractors
- Radiological technologists

Dental

- Dentists
- Dental hygienists

Behavioral Health

- Counselors
- Social workers
- Marriage and family therapists
- Substance abuse counselors
- Psychologists

School

- School Nurses
- Counselors
- Teachers



Dissemination Strategies

- Link program scheduling with existing grand rounds, conferences, in-services and standing meetings.
- Supply incentives: CME/CE credit, meals, service representatives, referrals to intensive services, and resources.



Obtaining Buy-In

- Reach out to medical directors and managers from tobacco related programs such as health promotion and quality assurance. Supply information that can provide the foundation for tobacco control within their system.
- Invite MCO and hospital leadership to join working group and curriculum committee.
- Network and support internal activities of these organizations (quality committee, CME/CE programs).

Partnerships within Healthcare Systems

- Managed Care Organizations
 - CIGNA HealthCare of Arizona
 - AHCCCS
 - Other Arizona managed care organizations

- Pharmaceutical and Medical Supply Companies
 - Disseminate Proactive Referral Fax and other AzTEPP Resource Materials
 - Provide Food for Programs



Proactive Referral System Evaluation

Passive and Proactive Referrals to Helpline and from Helpline

Referrals to Helpline

	Q1		Q2		Q3*	
	All Referrals	Proactive	All Referrals	Proactive	All Referrals	Proactive
Healthcare Provider	56	0	63	6	82	61
Health Ins. Co.	17	0	23	4	19	11
WIC Clinic	13	3	11	9	8	8
Local Project	71	36	87	49	66	18
Event	12	0	3	2	7	2

Referrals from Helpline

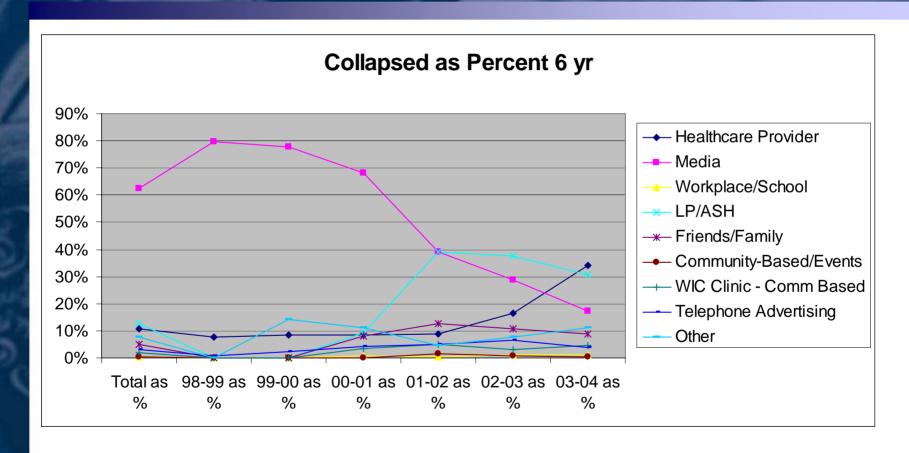
	Q1		Q2		Q3*	
	All Referrals	Proactive	All Referrals	Proactive	All Referrals	Proactive
Local Project	211	49	473	119	359	130

^{*} Preliminary

All referrals from healthcare providers, as well as proactive referrals, have increased.



How Clients Heard of Services





Questions?

- Helpline Information and outreach:
 - Contact Rebecca Ruiz-McGill rrmcgill@u.arizona.edu OR call the Helpline at 1-800-55-66-222
- Speakers' Bureau Training
 - Contact Mary Gilles, MD, gillesm@u.arizona.edu
- Proactive Referral System:
 - Visit www.TEPP.org/referralforms



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